Case 16-18423 Doc 1 Filed 06/02/16 Entered 06/02/16 16:44:07 Desc Main Document Page 1 of 51

| apter you are filing under: |
|--|
| Chapter 7 |
| Chapter 11 |
| Chapter 12 |
| Chapter 13 Check if this an amended filing |
| c |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | |
|-----|---|--|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on | Cassandra | |
| | your government-issued picture identification (for example, your driver's | First name | First name |
| | license or passport). | Middle name | Middle name |
| | Bring your picture identification to your meeting with the trustee. | Grant Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years | • | |
| | Include your married or maiden names. | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-5659 | |

Case 16-18423 Doc 1 Filed 06/02/16 Entered 06/02/16 16:44:07 Document Page 2 of 51 Desc Main

Case number (if known)

Debtor 1 Cassandra Grant

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|---|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and | ■ I have not used any business name or EINs. Business name(s) | ☐ I have not used any business name or EINs. Business name(s) |
| | doing business as names | EINs | EINs |
| 5. | Where you live | 634 E. 161st St. | If Debtor 2 lives at a different address: |
| | | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | | Cook | |
| | | County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for | Check one: | Check one: |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

Case 16-18423 Doc 1 Filed 06/02/16 Entered 06/02/16 16:44:07 Desc Main Document Page 3 of 51

Case number (if known) Debtor 1 Cassandra Grant

| ar | Tell the Court About | Your B | ankruptcy Ca | ise | | | | | |
|-----|---|--------------|--|--|---|--|---|--------------------------|---|
| 7. | The chapter of the Bankruptcy Code you are | | | orief description go to the top of | | | | 342(b) for Individuals I | Filing for Bankruptcy |
| | choosing to file under | ☐ Chapter 7 | | | | | | | |
| | | ☐ Chapter 11 | | | | | | | |
| | | □с | hapter 12 | | | | | | |
| | | ■ C | hapter 13 | | | | | | |
| 3. | How you will pay the fee | • | about how yo | u may pay. Typ attorney is sub | oically, if you ar | e paying the | fee yourself, you n | nay pay with cash, cas | al court for more details shier's check, or money redit card or check with |
| | | | | the fee in ins e in Installment | | | s option, sign and | attach the Application | for Individuals to Pay |
| | | | I request that but is not req applies to you | t my fee be wa uired to, waive ur family size ar | aived (You may your fee, and r nd you are una | y request this nay do so only ble to pay the | y if your income is fee in installment | less than 150% of the | T. By law, a judge may, official poverty line that ption, you must fill out petition. |
| | Have you filed for | | | | | | | | |
| , | bankruptcy within the | ■ No | | | | | | | |
| | last 8 years? | □ Ye | | | | | | | |
| | | | District | | | _ When | | Case number | |
| | | | District | | | _ When | | | |
| | | | District | | | _ When | | Case number | |
| 10. | Are any bankruptcy cases pending or being | ■ No | <u> </u> | | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | □ Ye | ∋ S. | | | | | | |
| | | | Debtor | | | | | Relationship to you | |
| | | | District | | | When | | Case number, if know | vn |
| | | | Debtor | | | | | Relationship to you | |
| | | | District | | | _ When | | Case number, if know | vn |
| 11. | Do you rent your residence? | ■ No | o. Go to li | ine 12. | | | | | |
| | residence: | □Y€ | es. Has yo | ur landlord obta | ained an eviction | on judgment a | against you and do | you want to stay in yo | our residence? |
| | | | | No. Go to line | 12. | | | | |
| | | | | Yes. Fill out <i>In</i> bankruptcy pe | | About an Evi | ction Judgment Ag | gainst You (Form 101A | a) and file it with this |
| | | | | | | | | | |

Document Page 4 of 51 Case number (if known) Debtor 1 Cassandra Grant Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. husiness? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or

livestock that must be fed, or a building that needs urgent repairs? Case 16-18423 Doc 1 Filed 06/02/16 Entered 06/02/16 16:44:07 Desc Main Document Page 5 of 51

Debtor 1 Cassandra Grant

Case number (if known)

 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 16-18423 Doc 1 Filed 06/02/16 Entered 06/02/16 16:44:07 Desc Main Document Page 6 of 51 Case number (if known)

| Deb | tor 1 Cassandra Grant | | Docume | ant rage or or t | Case number (# | known) | |
|------|---|------------------------------|--|---|-------------------------------|---|--|
| Part | 6: Answer These Quest | ions for R | eporting Purposes | | | | |
| 16. | What kind of debts do you have? | 16a. | Are your debts primarily continuity individual primarily for a personal transfer of the primarily continued to the | | | l in 11 U.S.C. § 101(8) as "incurred by an | |
| | | | ☐ No. Go to line 16b. | | | | |
| | | | Yes. Go to line 17. | | | | |
| | | 16b. | Are your debts primarily b money for a business or inve | | | | |
| | | | ☐ No. Go to line 16c. | | | | |
| | | | ☐ Yes. Go to line 17. | | | | |
| | | 16c. | State the type of debts you o | owe that are not consume | r debts or business d | lebts | |
| 17. | Are you filing under Chapter 7? | ■ No. | I am not filing under Chapter | r 7. Go to line 18. | | | |
| | Do you estimate that after any exempt property is excluded and | ☐ Yes. | I am filing under Chapter 7. I are paid that funds will be av | | | y is excluded and administrative expenses | |
| | administrative expenses | | □ No | | | | |
| | are paid that funds will be available for distribution to unsecured creditors? | | ☐ Yes | | | | |
| 18. | How many Creditors do you estimate that you owe? | ■ 1-49 □ 50-99 □ 100-1 | | ☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000 | | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000 | |
| | | 200-9 | 99 | | | | |
| 19. | How much do you estimate your assets to be worth? | \$100 , | 50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million | □ \$1,000,001 - \$ □ \$10,000,001 - \$ □ \$50,000,001 - \$ □ \$100,000,001 - | \$50 million \$100 million | □ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion | |
| 20. | How much do you estimate your liabilities to be? | ☐ \$100, | 50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million | □ \$1,000,001 - \$ □ \$10,000,001 - \$ □ \$50,000,001 - \$ □ \$100,000,001 - | \$50 million \$100 million | □ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion | |
| Part | 7: Sign Below | | | | | | |
| For | you | I have ex | amined this petition, and I dec | clare under penalty of perj | jury that the informat | ion provided is true and correct. | |
| | | | | | | der Chapter 7, 11,12, or 13 of title 11, se to proceed under Chapter 7. | |
| | | | no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this ocument, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | | |
| | | I request | request relief in accordance with the chapter of title 11, United States Code, specified in this petition. | | | | |
| | | bankrupto and 3571 | cy case can result in fines up | | | roperty by fraud in connection with a rs, or both. 18 U.S.C. §§ 152, 1341, 1519, | |
| | | Cassan | dra Grant e of Debtor 1 | S | ignature of Debtor 2 | | |
| | | Executed | on May 31, 2016 MM / DD / YYYY | E | xecuted on MM / D | DD / YYYY | |
| | | | | | | | |

Case 16-18423 Doc 1 Filed 06/02/16 Entered 06/02/16 16:44:07 Desc Main Document Page 7 of 51

Debtor 1 Cassandra Grant Page 7 01 51

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Alexand | der Tynkov | Date | May 31, 2016 |
|---------------------------|------------------------|---------------|----------------------|
| Signature of | Attorney for Debtor | | MM / DD / YYYY |
| Alexander Printed name | Tynkov | | |
| Zalutsky 8 | Pinski, Ltd. | | |
| Firm name | | | |
| 111 W. Wa | shington | | |
| Suite 1550 | | | |
| Chicago, I | L 60602 | | |
| Number, Street, | City, State & ZIP Code | | |
| Contact phone | 312-782-9792 | Email address | admin@ZAPLawFirm.com |
| 6273193 | | | |
| Dar number 9 Ct | ento | | |

| | | DUCUIII | | |
|--------------------|--------------------------|-------------------|-------------|-----------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Cassandra Grant | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| Spouse if, filing) | First Name | Middle Name | Last Name | |
| Jnited States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | – 0. 1.44 |
| if known) | | | | ☐ Check if this is an |
| | | | | amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | Your as Value o | ssets of what you own |
|-----|--|--------------------|-------------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 80,000.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 52,600.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 132,600.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 3,944.12 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 6,700.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 7,175.00 |
| | Your total liabilities | \$ | 17,819.12 |
| Par | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 2,357.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 1,873.00 |
| Par | 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ır other sch | nedules. |
| | ■ Yes What kind of debt do you have? | | |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Entered 06/02/16 16:44:07 Doc 1 Filed 06/02/16 Desc Main Case 16-18423 Page 9 of 51
Case number (if known) Document

Debtor 1 Cassandra Grant

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
| | 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. |

2,774.66 \$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total | claim |
|--|-------|----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 6,700.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 6,700.00 |

| | Ca | | | Doc | ument | Page 10 of 51 | | | Ινιαπι |
|-----------------|--|--|--|-------------------------|--|---|-----------------------------------|--------------|---|
| Fill i | this inform | nation to identify | your case and th | | | 1 446 10 01 31 | | | |
| Debt | or 1 | Cassandra G | Grant | | | | | | |
| | | First Name | | e Name | | Last Name | | | |
| Debte Spous | or 2 e, if filing) | First Name | Middle | e Name | | Last Name | | | |
| Jnite | d States Bar | nkruptcy Court for | the: NORTHER | N DIST | RICT OF ILLI | NOIS | | | |
| Case | number _ | | | | | _ | | | Check if this is an amended filing |
| Sc | hedule | rm 106A/B e A/B: Pr | operty | | | | | | 12/15 |
| nink i nform | t fits best. Be ation. If more r every quest | e as complete and a e space is needed, a tion. | accurate as possibl attach a separate s | le. If two heet to t | married peopl his form. On th | an asset fits in more than on e are filing together, both are le top of any additional page: wn or Have an Interest In | e equally responsib | le for suppl | lying correct |
| | No. Go to Part | | uitable interest in a | any resid | lence, building | , land, or similar property? | | | |
| _ | 634 E. 161 Street address, i | st St. f available, or other desc | cription | What | Single-family Duplex or mu | y? Check all that apply home Iti-unit building n or cooperative | the amount of an | y secured cl | s or exemptions. Put aims on <i>Schedule D:</i> Secured by Property. |
| _ | South Holl | | 60473-1680 | | Land | l or mobile home | Current value of entire property? | ' p | Current value of the portion you own? |
| | City | State | ZIP Code | □ □ Who | Other | t in the property? Check one | | ture of your | \$80,000.00 where the state of t |
| _ | Cook | | | | Debtor 2 only Debtor 1 and At least one of | Debtor 2 only If the debtors and another ou wish to add about this ite | Check if thi (see instruction | | inity property |
| | ages you ha | | | | | from Part 1, including any | | | \$80,000.00 |

■ No

☐ Yes

| Debtor 1 | Cassandra Grant | Document | Page 1 | .1 of 51 Case numb | oer (if known) | |
|------------------------------------|--|---------------------------|----------------|--------------------------|----------------|---|
| 4. Waterc | raft, aircraft, motor homes, ATVs an | | | - vehicles, and acces | sories | |
| | , , , , | , , | , | , | | |
| ■ No | | | | | | |
| ☐ Yes | | | | | | |
| | e dollar value of the portion you ow you have attached for Part 2. Write | | | | | \$0.00 |
| Part 3: De | escribe Your Personal and Household Ite | ems | | | | |
| Do you o | wn or have any legal or equitable in | | wing items? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| <i>Examp</i> □ No | nold goods and furnishings les: Major appliances, furniture, linens Describe | , china, kitchenware | | | | |
| | | | | | | **** |
| | 6 rooms of furn | iture and household (| goods | | | \$800.00 |
| □ No | les: Televisions and radios; audio, vidincluding cell phones, cameras, m Describe | | | | ners; music co | llections; electronic devices |
| Examp ■ No | ibles of value les: Antiques and figurines; paintings, other collections, memorabilia, co Describe | | ooks, picture | s, or other art objects; | stamp, coin, o | or baseball card collections; |
| Examp | nent for sports and hobbies les: Sports, photographic, exercise, ar musical instruments Describe | nd other hobby equipment | ; bicycles, po | ol tables, golf clubs, s | skis; canoes a | nd kayaks; carpentry tools; |
| 10. Firear Exam | ms <i>ples:</i> Pistols, rifles, shotguns, ammuni | tion, and related equipme | nt | | | |
| | Describe | | | | | |
| □ No | es ples: Everyday clothes, furs, leather condescribe | oats, designer wear, shoe | s, accessorie | es | | |
| | used personal of | clothing | | | | \$1,200.00 |
| 12. Jewel i Exam ■ No | r y <i>ples:</i> Everyday jewelry, costume jewel | ry, engagement rings, we | dding rings, l | neirloom jewelry, watc | ches, gems, go | old, silver |
| ☐ Yes. | Describe | | | | | |

| | Case 16-18423 Doc 1 | Filed 06/02/16 | | Desc Main |
|------------------|---|-----------------------------|---|---|
| Debto | 1 Cassandra Grant | Document | Page 12 of 51 Case number (if known) | |
| | n-farm animals | | | |
| E: ■ N | amples: Dogs, cats, birds, horses | | | |
| - | o es. Describe | | | |
| | | | | |
| 14. An ¶ ■ | other personal and household items yo | u did not already list, ii | ncluding any health aids you did not list | |
| | es. Give specific information | | | |
| | | | | |
| | dd the dollar value of all of your entries fo | | | \$2,600.00 |
| te | r Part 3. Write that number here | | | Ψ2,000.00 |
| D. 4.4 | Book to Mark Brook to Assess | | | |
| Part 4: Do yo | Describe Your Financial Assets own or have any legal or equitable inter | est in any of the follow | ring? | Current value of the |
| · | , , , | · | | portion you own? Do not deduct secured claims or exemptions. |
| 16. Ca | sh | | | |
| _ | , | our home, in a safe depo | osit box, and on hand when you file your petit | ion |
| ■ 1 | o es | | | |
| | | | | |
| E | institutions. If you have multiple acc | | of deposit; shares in credit unions, brokerage stitution, list each. | houses, and other similar |
| ■ 1 | o es | Institution r | name: | |
| | es | | | |
| | nds, mutual funds, or publicly traded stor amples: Bond funds, investment accounts w | | ney market accounts | |
| | es Institution or is | ssuer name: | | |
| | n-publicly traded stock and interests in ir nt venture | ncorporated and uninc | orporated businesses, including an intere | st in an LLC, partnership, and |
| I | | | | |
| | es. Give specific information about them Name of entity: | | % of ownership: | |
| | • | | · | |
| No. | vernment and corporate bonds and other gotiable instruments include personal check n-negotiable instruments are those you can | s, cashiers' checks, pro | missory notes, and money orders. | |
| ■ 1 | o es. Give specific information about them | | | |
| _ | Issuer name: | | | |
| _E | , | 1(k), 403(b), thrift saving | s accounts, or other pension or profit-sharing | plans |
| □ N | | | | |
| _ | es. List each account separately. Type of account: | Institution r | name: | |
| | Pension | Pension | with Fidelity | \$50,000.00 |
| 22 S A | curity deposits and prepayments | | | |
| Yo Ex | ur share of all unused deposits you have ma amples: Agreements with landlords, prepaid | | tinue service or use from a company ctric, gas, water), telecommunications compa | nies, or others |
| ■ n | | Institution r | name or individual: | |

Case 16-18423 Doc 1 Filed 06/02/16 Entered 06/02/16 16:44:07 Desc Main Document Page 13 of 51 Case number (if known) Debtor 1 **Cassandra Grant** 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

■ No

☐ Yes. Describe each claim.......

| | Case 16-18423 | | 06/02/16 cument | Entered 06 Page 14 of | 6/02/16 16:44:07 51 | Desc Main |
|----------------|--|----------------------------|--------------------|--------------------------|-------------------------------|-------------------------|
| Debt | or 1 Cassandra Grant | | | | Case number (if known) | |
| | ther contingent and unliquidat No Yes. Describe each claim | ed claims of every na | ature, includin | g counterclaims o | of the debtor and rights to | set off claims |
| 35. A | ny financial assets you did not | already list | | | | |
| | No | | | | | |
| | Yes. Give specific information | | | | | |
| | | | | | | |
| | Add the dollar value of all of yo for Part 4. Write that number h | | | | - | \$50,000.00 |
| | _ | | | | | |
| Part 5 | Describe Any Business-Related | Property You Own or H | ave an Interest | n. List any real esta | te in Part 1. | |
| 37. D o | you own or have any legal or equi | itable interest in any bus | siness-related p | roperty? | | |
| | No. Go to Part 6. | | | | | |
| | es. Go to line 38. | | | | | |
| | | | | | | |
| Part 6 | Describe Any Farm- and Comme If you own or have an interest in fa | | roperty You Ow | n or Have an Interes | et In. | |
| 46. D | o you own or have any legal o | r equitable interest in | any farm- or o | commercial fishin | g-related property? | |
| _ | No. Go to Part 7. | | , | | 3 · · · · · · · · · · · · · · | |
| [| Yes. Go to line 47. | | | | | |
| | | | | | | |
| Part 7 | Describe All Property You | Own or Have an Interest | t in That You Did | l Not List Above | | |
| | o you have other property of a | | lready list? | | | |
| | No | y 0.00p | | | | |
| | Yes. Give specific information | | | | | |
| | | | | | | |
| 54. | Add the dollar value of all of yo | our entries from Part | 7. Write that n | umber here | | \$0.00 |
| Part 8 | List the Totals of Each Part | of this Form | | | | |
| 55. | Part 1: Total real estate, line 2 | | | | | \$80,000.00 |
| 56. | Part 2: Total vehicles, line 5 | | | \$0.00 | | <u> </u> |
| 57. | Part 3: Total personal and hou | sehold items, line 15 | | \$2,600.00 | | |
| 58. | Part 4: Total financial assets, li | ine 36 | | \$50,000.00 | | |
| | Part 5: Total business-related | | | \$0.00 | | |
| | Part 6: Total farm- and fishing- | | 52 | \$0.00 | | |
| 61. | Part 7: Total other property no | t listed, line 54 | + | \$0.00 | | |
| 62. | Total personal property. Add lin | nes 56 through 61 | | \$52,600.00 | Copy personal property t | otal \$52,600.00 |
| 63. | Total of all property on Schedu | ule A/B. Add line 55 + | line 62 | | | \$132,600.00 |

Official Form 106A/B Schedule A/B: Property page 5

| nation to identify your | case: | | |
|-------------------------|-------------------|------------------------|--|
| Casasandus Cusut | | | |
| Cassandra Grant | | | |
| First Name | Middle Name | Last Name | |
| | | | |
| First Name | Middle Name | Last Name | |
| nkruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| | | | |
| | | | ☐ Check i |
| r | First Name | First Name Middle Name | First Name Middle Name Last Name First Name Middle Name Last Name |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: | Identify the | Property | You Claim | as Exempt |
|---------|--------------|----------|-----------|-----------|
|---------|--------------|----------|-----------|-----------|

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption |
|--------------------------------------|---------------------|---|--|
| Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| \$80,000.00 | | \$15,000.00 | 735 ILCS 5/12-901 |
| | | 100% of fair market value, up to any applicable statutory limit | |
| \$800.00 | | \$800.00 | 735 ILCS 5/12-1001(b) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| \$600.00 | | \$600.00 | 735 ILCS 5/12-1001(b) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| \$1,200.00 | | 100% | 735 ILCS 5/12-1001(a) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| \$50,000.00 | | | 735 ILCS 5/12-1006 |
| | | 100% of fair market value, up to | |
| | \$800.00 \$1,200.00 | \$800.00 \$1,200.00 \$1,200.00 \$1,200.00 \$1,200.00 | Check only one box for each exemption. \$80,000.00 \$15,000.00 100% of fair market value, up to any applicable statutory limit \$800.00 \$100% of fair market value, up to any applicable statutory limit \$600.00 \$100% of fair market value, up to any applicable statutory limit \$1,200.00 \$100% of fair market value, up to any applicable statutory limit \$1,200.00 \$100% of fair market value, up to any applicable statutory limit \$1,200.00 \$100% of fair market value, up to any applicable statutory limit |

Case 16-18423 Doc 1 Filed 06/02/16 Entered 06/02/16 16:44:07 Desc Main Document Page 16 of 51

Case number (if known)

Case number (if known)

| 3. | ou claiming a homestead exemption of more than \$160,375? ect to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) |
|----|--|
| | No |
| | Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? |
| | □ No |
| | □ Yes |
| | |

Official Form 106C

| | Ca | se 16-18423 | Doc 1 | Filed 06/0 Docum | | ed 06/02/16 16:4 7 of 51 | 44:07 Desc | Main |
|-----------|--------------------------|---|---------------|-------------------------------|---------------------------|---|--|-------------------|
| Fill | in this inforr | nation to identify you | ır case: | | | | | |
| Deb | tor 1 | Cassandra Grar | nt | | | | | |
| | | First Name | Mi | ddle Name | Last Name | | | |
| | tor 2 use if, filing) | First Name | Mic | ddle Name | Last Name | | | |
| | | al monte of October than | NODTI | JEDN DIOTOIO | | | | |
| Unit | ed States Ba | nkruptcy Court for the: | NORTH | HERN DISTRIC | I OF ILLINOIS | | | |
| | e number _ | | | | | | | |
| (if kno | own) | | | | | | _ | ck if this is an |
| | | | | | | | amei | nded filing |
| Offi | icial Forn | n 106D | | | | | | |
| | | | : Who I | Have Cla | ims Secure | d by Property | ., | 12/15 |
| | | | | | | | | |
| s ne | | e Additional Page, fill it o | | | | qually responsible for su On the top of any addition | | |
| . Do | any creditors | have claims secured by | your prope | erty? | | | | |
| | ☐ No. Check | this box and submit tl | his form to t | the court with yo | our other schedules. | You have nothing else to | report on this form. | |
| | Yes. Fill in | all of the information | below. | | | | | |
| Part | List A | II Secured Claims | | | | | | |
| | | claims. If a creditor has r | more than on | ne secured claim li | st the creditor separatel | Column A | Column B | Column C |
| for e | ach claim. If m | nore than one creditor has ist the claims in alphabetic | a particular | claim, list the othe | r creditors in Part 2. As | Amount of claim Do not deduct the | Value of collateral that supports this | Unsecured portion |
| <u> </u> |] 0 1 - 0 | | B | | | value of collateral. | claim | If any |
| 2.1 | Creditor's Name | ınty Treaserer | | | secures the claim: | \$3,944.12 | \$80,000.00 | \$0.00 |
| | Ordanor Ornam | • | | 61st St. Soutl 680 Cook Co | | | | |
| | | | | -15-413-018-0 | , | | | |
| | P.O. Box | 805438 | | date you file, the | claim is: Check all that | | | |
| | | IL 60680-4155 | apply. | rent | | | | |
| | Number, Street | , City, State & Zip Code | Unliquid | • | | | | |
| | | | ☐ Dispute | | | | | |
| Who | owes the de | ebt? Check one. | Nature of | lien. Check all the | at apply. | | | |
| | Debtor 1 only | | • | • | (such as mortgage or se | ecured | | |
| _ | Debtor 2 only | | car loa | , | | | | |
| _ | Debtor 1 and De | • | | • ' | (lien, mechanic's lien) | | | |
| \square | at least one of t | he debtors and another | | ent lien from a laws | suit | | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$3,944.12

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$3,944.12

Last 4 digits of account number

☐ Other (including a right to offset)

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

0000

☐ Check if this claim relates to a

Date debt was incurred 2014

community debt

Page 18 of 51 Document Fill in this information to identify your case: Debtor 1 Cassandra Grant Middle Name Last Name First Name Debtor 2 Middle Name (Spouse if, filing) First Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? ■ No. Go to Part 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim** Priority Nonpriority amount 2.1 **Internal Revenue Service** Last 4 digits of account number \$6,700.00 \$6,700.00 \$0.00 Priority Creditor's Name Dept of the Treasury When was the debt incurred? 2012 P.O. Box 21126 Philadelphia, PA 19114 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: ■ Domestic support obligations ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No Other. Specify ☐ Yes back taxes Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? □ No. You have nothing to report in this part. Submit this form to the court with your other schedules.

List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

Case 16-18423 Doc 1 Filed 06/02/16 Entered 06/02/16 16:44:07 Desc Main Document Page 19 of 51

Debtor 1 Cassandra Grant Case number (if know) 4.1 Afni Last 4 digits of account number 2208 \$387.00 Nonpriority Creditor's Name 1310 Martin Luther King Dr When was the debt incurred? Opened 12/01/15 **Bloomington, IL 61701** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney At T U-Verse ☐ Yes 4.2 Ascension Services L P Last 4 digits of account number 0146 \$1,550.00 Nonpriority Creditor's Name 1550 N Norwood Ste 305 When was the debt incurred? Opened 7/01/14 Hurst. TX 76054 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts **Factoring Company Account Kahuna** ☐ Yes Other. Specify **Payment Solutions** 4.3 **AT&T Uverse** Last 4 digits of account number \$387.00 Nonpriority Creditor's Name When was the debt incurred? IC System 444 Highway 96 East, P.O. Box Saint Paul, MN 55164-0378 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

Case 16-18423 Doc 1 Filed 06/02/16 Entered 06/02/16 16:44:07 Desc Main Document Page 20 of 51

Debtor 1 Cassandra Grant Case number (if know) 4.4 **AT&T Wireless** Last 4 digits of account number \$387.00 Nonpriority Creditor's Name P.O. Box 68055 When was the debt incurred? Anaheim, CA 92817 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Cellular Service ☐ Yes 4.5 \$357.00 Comcast Last 4 digits of account number Nonpriority Creditor's Name 1255 W North Ave When was the debt incurred? Chicago, IL 60622-1562 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify service 4.6 Convergent Outsoucing, Inc Last 4 digits of account number 8003 \$357.00 Nonpriority Creditor's Name Po Box 9004 When was the debt incurred? Opened 1/01/15 Renton, WA 98057 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney Comcast ☐ Yes

Case 16-18423 Doc 1 Filed 06/02/16 Entered 06/02/16 16:44:07 Desc Main Document Page 21 of 51

Debtor 1 Cassandra Grant Case number (if know) 4.7 Dr. Wojciech Ornowski Last 4 digits of account number \$700.00 Nonpriority Creditor's Name 1600 Torrence Ave When was the debt incurred? Calumet City, IL 60409 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify medical ☐ Yes 4.8 IC Systems, Inc Last 4 digits of account number 2001 \$700.00 Nonpriority Creditor's Name 444 Highway 96 East When was the debt incurred? Opened 6/01/11 Po Box 64378 St Paul, MN 55164 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Collection Attorney Wojciech Ornowski** 4.9 **Kahuna Payment Solutions** \$1,550.00 Last 4 digits of account number Nonpriority Creditor's Name 801 W Chestnut St When was the debt incurred? Suite C Bloomington, IL 61701 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify collection account ☐ Yes

Case 16-18423 Doc 1 Filed 06/02/16 Entered 06/02/16 16:44:07 Desc Main Page 22 of 51
Case number (if know) Document

| 4.1 | MCSI -Municipal Collection Services, Inc Nonpriority Creditor's Name | Last 4 digits of account number 5269 | \$200.00 |
|----------|--|---|----------|
| | 7330 College Dr | When was the debt incurred? | |
| | Suite 108 Palo Heights, IL 60463 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify 01 Village Of South Holland | |
| 4.1 | MCSI -Municipal Collection Services, Inc | Last 4 digits of account number 6655 | \$200.00 |
| <u> </u> | Nonpriority Creditor's Name | | + |
| | 7330 College Dr Suite 108 | When was the debt incurred? | |
| | Palo Heights, IL 60463 | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | Пол | |
| | <u> </u> | Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | Student loans | |
| | ☐ Check if this claim is for a community debt | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify 01 City Of Country Club Hills Ss | |
| 4.1 | MCSI -Municipal Collection | | |
| 2 | Services, Inc | Last 4 digits of account number 6566 | \$200.00 |
| | Nonpriority Creditor's Name 7330 College Dr | When was the debt incurred? | |
| | Suite 108 | | |
| | Palo Heights, IL 60463 | _ | |
| | Number Street City State ZIp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | _ | |
| | Debtor 1 only | Contingent | |
| | Debtor 2 only | Unliquidated | |
| | Debtor 1 and Debtor 2 only | Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | Debts to pension or profit-sharing plans, and other similar debts | |
| | | | |
| | ☐ Yes | ■ Other. Specify 01 City Of Country Club Hills Ss | |

Debtor 1 Cassandra Grant

Case 16-18423 Doc 1 Filed 06/02/16 Entered 06/02/16 16:44:07 Desc Main Document Page 23 of 51

| Deni | Cassaliula Glaill | | Case Humber (II know) | |
|----------|---|--|---|----------|
| 4.1 3 | Penn Credit | Last 4 digits of account number | 4174 | \$200.00 |
| | Nonpriority Creditor's Name Attn:Bankruptcy Po Box 988 Harrisburg, PA 17108 | When was the debt incurred? | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | ■ Other. Specify 01 Village 0 | Of South Holland II | |
| 4.1 4 | Roadloans.com | Last 4 digits of account number | 0001 | \$0.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy 5201 Rufe Snow Dr Ste 400 North Richland Hills, TX 76180 | When was the debt incurred? | Opened 10/01/06 Last Active 10/21/09 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | ng plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify Automobile | 9 | |
| 4.1 | Santander Consumer USA | | 1000 | \$0.00 |
| 5 | Nonpriority Creditor's Name | Last 4 digits of account number | | φυ.υυ |
| | Po Box 961245 Fort Worth, TX 76161 | When was the debt incurred? | Opened 10/01/06 Last Active 1/24/13 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | ☐ Yes | Other Specify Automobile | 9 | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

Case 16-18423 Doc 1 Filed 06/02/16 Entered 06/02/16 16:44:07 Desc Main Document Page 24 of 51

Debtor 1 Cassandra Grant

Case number (if know)

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Т | otal Claim |
|--------------|-----|---|-----|----|------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 6,700.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 6,700.00 |
| | | | | Т | otal Claim |
| | 6f. | Student loans | 6f. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 7,175.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 7,175.00 |

| Fill in this infor | mation to identify your | case: | | |
|---|-------------------------|-------------------|-------------|--|
| Debtor 1 | Cassandra Grant | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with Name, Number | whom you have the street, City, State and ZIF | e contract or lease | State what the contract or lease is for |
|-----|-----------|------------------------------|---|---------------------|---|
| 2.1 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | <u> </u> |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | _ |
| 2.4 | J., | | , 5.13.13 | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.5 | Oity | | State | ZIF Code | |
| | Name | | | | |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | _ |

Case 16-18423 Doc 1 Filed 06/02/16 Entered 06/02/16 16:44:07 Desc Main Document Page 26 of 51

| | | Docume | iii Paue 20 t | 1 31 | |
|--------------------------------|---|-------------------------------|-------------------------|--|-------------------|
| Fill in this i | nformation to identify your | | | | |
| Debtor 1 | Cassandra Grant | | | | |
| 5 | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing |) First Name | Middle Name | Last Name | | |
| United State | es Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case numbe | ar. | | | | |
| (if known) | | | | ☐ Check if amende | this is an |
| Official | Form 106H | | | | • |
| | ıle H: Your Cod | ehtors | | | 12/15 |
| ocneat | ale II. I dui dou | CDIOIS | | | 12/13 |
| your name a | d number the entries in the and case number (if known) ou have any codebtors? (If you | . Answer every question | | o this page. On the top of any Additional as a codebtor. | Pages, write |
| ■ No □ Yes | | | | | |
| | in the last 8 years, have you , California, Idaho, Louisiana, | | | (? (Community property states and territorington, and Wisconsin.) | es include |
| _ | Go to line 3. Did your spouse, former spou | use, or legal equivalent live | e with you at the time? | | |
| in line 2 | 2 again as a codebtor only i 06D), Schedule E/F (Official | f that person is a guaran | tor or cosigner. Make | if your spouse is filing with you. List the sure you have listed the creditor on Sch 6G). Use Schedule D, Schedule E/F, or S | edule D (Official |
| | olumn 1: Your codebtor ame, Number, Street, City, State and ZI | P Code | | Column 2: The creditor to whom you Check all schedules that apply: | owe the debt |
| 3.1 _N | ame | | | □ Schedule D, line □ Schedule E/F, line □ Schedule G, line | |
| | umber Street ity | State | ZIP Code | _ | |
| 3.2 | | | | ☐ Schedule D, line | |
| | ame | | | ☐ Schedule E/F, line ☐ Schedule G, line ☐ | |
| | umber Street | | | _ | |
| С | ity | State | ZIP Code | | |

Case 16-18423 Doc 1 Filed 06/02/16 Entered 06/02/16 16:44:07 Desc Main Document Page 27 of 51

| | | | | | | - | | | | |
|----------------|--|--|--|-------------|---------------|-----------------|---|--|--------------------------------|--------------------------------------|
| Fill | in this information to identify your | case: | | | | | | | | |
| Del | btor 1 Cassandra | Grant | | | | | | | | |
| | btor 2 puse, if filing) | | | | _ | | | | | |
| Uni | ited States Bankruptcy Court for th | e: NORTHERN DISTRIC | CT OF ILLINOIS | | _ | | | | | |
| O Se a sup spo | fficial Form 106l chedule I: Your Inc as complete and accurate as possiblying correct information. If yourse. If you are separated and you have a separated and you have separated to this form | ssible. If two married peo u are married and not fili our spouse is not filing w | ng jointly, and your ith you, do not inclu | spouse is | s liv nati | and Deking with | 3 income MM / DD/ \(\) otor 2), bo you, incl t your spe | ed filing ent show as of the YYYY th are edude info ouse. If r | rmation about nore space is | 12/15 ible for your needed, |
| Pai | rt 1: Describe Employmen | t | | | | | · | | | |
| 1. | Fill in your employment information. | | Debtor 1 | ebtor 1 | | | Debtor 2 | 2 or non | -filing spouse | |
| | If you have more than one job, attach a separate page with information about additional employers. | Employment status Occupation | ■ Employed □ Not employed | | | | ☐ Empl | • | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | | | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | | | | | | | | |
| | | How long employed t | here? | | | | _ | | | |
| Pai | Give Details About Mo | onthly Income | | | | | | | | |
| spo | imate monthly income as of the use unless you are separated. | | | | | | | | | |
| - | ou or your non-filing spouse have n e space, attach a separate sheet t | | ombine the informatio | n for all e | mplo | oyers for | that perso | on on the | lines below. If y | ou need |
| | | | | | | For De | btor 1 | | ebtor 2 or iling spouse | |
| 2. | List monthly gross wages, sal deductions). If not paid monthly | | | 2. | \$ | | 0.00 | \$ | N/A | |
| 3. | Estimate and list monthly ove | rtime pay. | | 3. | +\$ | | 0.00 | +\$_ | N/A | |
| 4. | Calculate gross Income. Add | line 2 + line 3. | | 4. | \$ | | 0.00 | \$ | N/A | |

Case 16-18423 Doc 1 Filed 06/02/16 Entered 06/02/16 16:44:07 Desc Main Document Page 28 of 51

| Debt | or 1 | Cassandra Grant | _ | | Case | e number (<i>if kn</i> | own) | | | | |
|------|---------------|--|----------------|-----------|-----------|-------------------------|------|-----------|------------|--------------------|--------------------|
| | | | | | Fo | r Debtor 1 | | | r Debtor | | |
| | 0 | us line 4 hore | 4 | | Φ. | | | | n-filing s | • | |
| | Cop | by line 4 here | 4. | | \$_ | U | .00 | \$_ | | N/A | <u>4</u> |
| 5. | List | all payroll deductions: | | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5 | a. | \$ | 0 | .00 | \$ | | N/A | A |
| | 5b. | Mandatory contributions for retirement plans | 5l | ٥. | \$ | | .00 | \$ | | N/A | |
| | 5c. | Voluntary contributions for retirement plans | 50 | | \$_ | | .00 | \$_ | | N/A | |
| | 5d. | Required repayments of retirement fund loans | 50 | | \$_ | | .00 | \$_ | | N/A | |
| | 5e. 5f. | Insurance Domestic support obligations | 56 5f | | \$_ \$ | | .00 | \$_ \$ | | N/ <i>A</i> | |
| | 5g. | Union dues | 5 ₍ | | \$ _ | | .00 | \$ \$ | | N/A | |
| | 5h. | Other deductions. Specify: | | 9. h.+ | · . | | .00 | + \$- | | N/A | |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | — 6. | | \$ | 0 | .00 | \$ | | N/A | |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$ | | .00 | \$ | | N/A | _ |
| 8. | | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | · _ | | | · _ | | | <u> </u> |
| | | monthly net income. | 88 | a. | \$ | 0 | .00 | \$ | | N/A | 4 |
| | 8b. | Interest and dividends | 81 | | \$ | | .00 | \$ | | N/A | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce | nt | | _ | | | _ | | | |
| | | settlement, and property settlement. | 80 | c. | \$ | 0 | .00 | \$ | | N/A | 4 |
| | 8d. | Unemployment compensation | 80 | d. | \$ | | .00 | \$ | | N/A | - |
| | 8e. | Social Security | 86 | Э. | \$ | 0 | .00 | \$ | | N/A | 4 |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | ce 8f | f. | \$ | 0 | .00 | \$ | | N/A | A |
| | 8g. | Pension or retirement income | 8 <u>(</u> | g. | \$ | 499 | .00 | \$ | | N/A | 4 |
| | 8h. | Other monthly income. Specify: State of IL Caregiver income | 81 | h.+ | | 1,558 | .00 | + \$ | | N/A | 4 |
| | | Son's contribution (from SSI) | | | \$_ | 300 | .00 | \$_ | | N/A | <u>4</u> |
| 9. | Add | l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | | \$ | 2,357 | .00 | \$_ | | N/ | /A |
| 10. | Calc | culate monthly income. Add line 7 + line 9. | 10. | \$ | | 2,357.00 | + \$ | | N/A |]=[\$ | 2,357.00 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | | | 2,337.00 | | | 11// | | 2,337.00 |
| 11. | othe Do | te all other regular contributions to the expenses that you list in Schedul ade contributions from an unmarried partner, members of your household, you are friends or relatives. not include any amounts already included in lines 2-10 or amounts that are no cify: | ır dep | | | • | | • | Schedule | e <i>J.</i> +\$ | 0.00 |
| 12. | | I the amount in the last column of line 10 to the amount in line 11. The ree that amount on the Summary of Schedules and Statistical Summary of Certalies | | | | | | | e. 12. | \$ | 2,357.00 |
| 13. | Do : | you expect an increase or decrease within the year after you file this form No. | n? | | | | | | | Comb month | ined nly income |
| | $\overline{}$ | Yes. Explain: | | | | | | | | | |

Case 16-18423 Doc 1 Filed 06/02/16 Entered 06/02/16 16:44:07 Desc Main Document Page 29 of 51

| Fill in | n this informa | ition to identify yo | our case: | | | İ | | |
|-----------------|----------------------------|---------------------------------------|------------------------|--|--|------------------|------------------------------------|-------------------------------|
| Debto | | Cassandra (| | | | | k if this is: An amended filing | |
| Debto | | | | | | | A supplement show | ving postpetition chapter |
| ` . | use, if filing) | | | | | _ | <u> </u> | the following date: |
| Unite | d States Bankr | ruptcy Court for the | : NORTH | IERN DISTRICT OF ILLIN | OIS | 1 | MM / DD / YYYY | |
| Case (If kno | e number own) | | | | | | | |
| | | orm 106J | | | | | | |
| Be a | s complete a | ore space is ne | possible eded, atta | . If two married people ar | | | | |
| | <u> </u> | n). Answer eve | | n. | | | | |
| Part 1. | Is this a joir | ribe Your House nt case? | enold | | | | | |
| | ■ No. Go to | | in a separ | ate household? | | | | |
| | □ N □ Y | - | st file Offici | al Form 106J-2, <i>Expen</i> ses | for Separate House | ehold of Debte | or 2. | |
| 2. | Do you have | e dependents? | ■ No | | | | | |
| | Do not list D Debtor 2. | ebtor 1 and | ☐ Yes. | Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dependent's age | Does dependent live with you? |
| | Do not state dependents | | | | | | | □ No |
| | dependents | names. | | | | | | ☐ Yes ☐ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No □ Yes |
| | | | | | | | | □ No |
| • | Da | | _ | | | | | ☐ Yes |
| | expenses o | penses include f people other t | han $_{\square}$ | No Yes | | | | |
| | yourself and | d your depende | nts? □ | 165 | | | | |
| expe | mate your ex | | our bankr | ly Expenses uptcy filing date unless y y is filed. If this is a supp | | | | |
| the v | • | h assistance an | | government assistance it sluded it on Schedule I: Y | • | | Your exp | enses |
| | | | | | | | | |
| 4. | | or home owners and any rent for th | | ses for your residence. In or lot. | nclude first mortgage | e 4. \$ | | 0.00 |
| | If not include | led in line 4: | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. \$ | | 329.00 |
| | • | rty, homeowner's | | | | 4b. \$ | | 131.00 |
| | | maintenance, re owner's associa | | upkeep expenses dominium dues | | 4c. \$ 4d. \$ | | 100.00 0.00 |
| 5. | | | | our residence, such as ho | me equity loans | 5. \$ | - | 0.00 |

Case 16-18423 Doc 1 Filed 06/02/16 Entered 06/02/16 16:44:07 Desc Main Document Page 30 of 51

| Debtor 1 Ca | ssandra Grant | Case num | ber (if known) | |
|-----------------------------|---|-----------------|------------------|-------------------------------|
| 6. Utilities: | | | | |
| | ectricity, heat, natural gas | 6a. | \$ | 250.00 |
| | ater, sewer, garbage collection | 6b. | | 65.00 |
| | ephone, cell phone, Internet, satellite, and cable services | 6c. | | 52.00 |
| | ner. Specify: | 6d. | · | 0.00 |
| | d housekeeping supplies | 7. | \$ | 400.00 |
| | e and children's education costs | 8. | \$ | 0.00 |
| | , laundry, and dry cleaning | 9. | · | |
| _ | - | 10. | | 150.00 |
| | care products and services | | · | 65.00 |
| | and dental expenses | 11. | > | 100.00 |
| | rtation. Include gas, maintenance, bus or train fare. | 12. | \$ | 50.00 |
| | clude car payments. Iment, clubs, recreation, newspapers, magazines, and books | 13. | · | 50.00 |
| | | | · | |
| | le contributions and religious donations | 14. | \$ | 0.00 |
| Insurance | e. clude insurance deducted from your pay or included in lines 4 or 20. | | | |
| | ciude insurance deducted from your pay or included in lines 4 or 20. | 15a. | \$ | 0.00 |
| | alth insurance | 15a. 15b. | | |
| | | | · | 31.00 |
| | hicle insurance | 15c. | * | 0.00 |
| | ner insurance. Specify: | 15d. | \$ | 0.00 |
| | o not include taxes deducted from your pay or included in lines 4 or 20. | _ | | |
| Specify: | | 16. | \$ | 0.00 |
| | ent or lease payments: | | | |
| | r payments for Vehicle 1 | 17a. | · — | 0.00 |
| | r payments for Vehicle 2 | 17b. | | 0.00 |
| | ner. Specify: | 17c. | \$ | 0.00 |
| 17d. Oth | ner. Specify: | 17d. | \$ | 0.00 |
| | ments of alimony, maintenance, and support that you did not report | | | 0.00 |
| | d from your pay on line 5, Schedule I, Your Income (Official Form 106 | i). 18. | | 0.00 |
| 9. Other pa | yments you make to support others who do not live with you. | | \$ | 0.00 |
| Specify: | | 19. | | |
| | al property expenses not included in lines 4 or 5 of this form or on So | | | |
| 20a. Mo | rtgages on other property | 20a. | · | 0.00 |
| 20b. Re | al estate taxes | 20b. | · | 0.00 |
| 20c. Pro | pperty, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| 20d. Ma | intenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| | meowner's association or condominium dues | 20e. | \$ | 0.00 |
| 1. Other: Sp | | 21. | · | 100.00 |
| | 1 John J. John J. John J. | | . + | 100.00 |
| 2. Calculate | e your monthly expenses | | | |
| 22a. Add | lines 4 through 21. | | \$ | 1,873.00 |
| 22b. Cop | y line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J- | 2 | \$ | |
| | line 22a and 22b. The result is your monthly expenses. | | \$ | 1,873.00 |
| 220. Add | and LLa and LLD. The result to your monthly expenses. | | | 1,073.00 |
| 3. Calculate | e your monthly net income. | | | |
| 23a. Co | py line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 2,357.00 |
| | py your monthly expenses from line 22c above. | 23b. | -\$ | 1,873.00 |
| | | | · ——— | |
| 23c. Sul | btract your monthly expenses from your monthly income. | | | |
| | e result is your <i>monthly net income</i> . | 23c. | \$ | 484.00 |
| 7 | , , | | | |
| | expect an increase or decrease in your expenses within the year after | | | |
| | le, do you expect to finish paying for your car loan within the year or do you expect y | our mortgage | payment to incre | ease or decrease because of a |
| modificatio | n to the terms of your mortgage? | | | |
| ■ No. | | | | |
| ☐ Yes. | Explain here: | | | |

Case 16-18423 Doc 1 Filed 06/02/16 Entered 06/02/16 16:44:07 Desc Main Document Page 31 of 51

| Fill in thi | is information to identify your | case: | | | |
|---------------------------|--|---------------------------|-----------------------------|---------------------------|---------------------------------|
| Debtor 1 | Cassandra Grant | | | | |
| . | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, f | | Middle Name | Last Name | | |
| | 3, | | | | |
| United St | tates Bankruptcy Court for the: | NORTHERN DISTRICT | F OF ILLINOIS | | |
| Case nur | mber | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| | | | | | |
| | | | | | |
| | l Form 106Dec | | | | |
| Decla | aration About a | an Individual | Debtor's Sc | hedules | 12/15 |
| | | | | | |
| f two ma | rried people are filing togethe | r, both are equally respo | onsible for supplying cor | rect information. | |
| You must | t file this form whenever you f | ile hankruntov schedule | s or amended schedules | Making a false stateme | nt concealing property or |
| | money or property by fraud i | | | | |
| years, or | both. 18 U.S.C. §§ 152, 1341, 1 | 1519, and 3571. | | | • |
| | | | | | |
| | Sign Below | | | | |
| | olgii below | | | | |
| Did | you pay or agree to pay some | one who is NOT an atto | rnev to help you fill out h | ankruntov forms? | |
| 2.4 | you pay or agree to pay come | | moy to morp you mil out b | anna aproy ronno r | |
| | No | | | | |
| | Yes. Name of person | | | Attach Rankrun | tcy Petition Preparer's Notice, |
| | es. Name of person | | | | d Signature (Official Form 119) |
| | | | | | |
| الممال | ar nanaltir of narium. I daalara | that I have road the aun | amony and ashedules file | d with this declaration o | |
| | er penalty of perjury, I declare they are true and correct. | that I have read the Sun | imary and schedules file | u with this declaration a | na |
| | , | | | | |
| | /s/ Cassandra Grant | | X | | |
| | Cassandra Grant | | Signature of | Debtor 2 | |
| ; | Signature of Debtor 1 | | | | |
| 1 | Date May 31, 2016 | | Date | | |
| | | | | | |

Case 16-18423 Doc 1 Filed 06/02/16 Entered 06/02/16 16:44:07 Desc Main Document Page 32 of 51

| Fill ir | n this inform | ation to identify you | r case: | | | | | | | |
|------------------|-----------------------|---|--|------------------------------------|--|------------------------------------|--|--|--|--|
| Debto | | Cassandra Gran | | | | | | | | |
| | | First Name | Middle Name | Last Name | | | | | | |
| Debto (Spous | or 2 e if, filing) | First Name | Middle Name | Last Name | | | | | | |
| Unite | d States Ban | kruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS | | | | | | |
| | | aptoy Court to the | | | | | | | | |
| Case (if know | number | | | | _ | theck if this is an mended filing | | | | |
| Oŧŧ: | oial Ear | m 107 | | | | | | | | |
| | cial For | | Affairs for Individ | duale Eiling for B | ankruntov | 4/4/ | | | | |
| | | | | | | 4/16 | | | | |
| inforn | nation. If mo | ore space is needed, | attach a separate sheet to | | equally responsible for sup α additional pages, write you | | | | | |
| numb | er (if known |). Answer every que | stion. | | | | | | | |
| Part ' | Give De | etails About Your Ma | rital Status and Where You | Lived Before | | | | | | |
| 1. V | Vhat is your | current marital statu | ıs? | | | | | | | |
| | ☐ Married | | | | | | | | | |
| I | Not marr | ied | | | | | | | | |
| 2. C | Ouring the la | st 3 years, have you | lived anywhere other than | where you live now? | | | | | | |
| | No | 0 | | | | | | | | |
| - [| _ | Yes. List all of the places you lived in the last 3 years. Do not include where you live now. | | | | | | | | |
| | Debtor 1 Pri | or Address: | Dates Debtor 1 | Debtor 2 Prior Ad | dress: | Dates Debtor 2 | | | | |
| | | | lived there | | | lived there | | | | |
| | | | | | ity property state or territory co, Texas, Washington and W | | | | | |
| ı | No | | | | | | | | | |
| | ☐ Yes. Mal | ke sure you fill out Scl | nedule H: Your Codebtors (Of | fficial Form 106H). | | | | | | |
| Part : | 2 Explair | the Sources of You | r Income | | | | | | | |
| F | ill in the total | amount of income yo | nployment or from operatin u received from all jobs and a have income that you receive | all businesses, including part- | | ndar years? | | | | |
| | □ No | | | | | | | | | |
| ı | Yes. Fill | in the details. | | | | | | | | |
| | | | Debtor 1 | | Debtor 2 | | | | | |
| | | | Sources of income | Gross income | Sources of income | Gross income | | | | |
| | | | Check all that apply. | (before deductions and exclusions) | Check all that apply. | (before deductions and exclusions) | | | | |
| | • | of current year until I for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$884.76 | ☐ Wages, commissions, bonuses, tips | | | | | |
| | | | ☐ Operating a business | | ☐ Operating a business | | | | | |

Official Form 107

Debtor 1 Cassandra Grant Document Page 33 of 51
Case number (if known)

| | | | | Debtor 1 | | | Debtor 2 | | |
|-----|--|--|--|--|---|---|---|--------------------------|---|
| | | Sources of income Check all that apply. | (befo | s income re deductions and sions) | Sources of inc Check all that a | | Gross income (before deductions and exclusions) | | |
| | r last calen nuary 1 to | dar year: December 3 | 31, 2015) | ■ Wages, commissions, bonuses, tips | | \$10,685.00 | ☐ Wages, com bonuses, tips | missions, | |
| | | | | ☐ Operating a business | | | ☐ Operating a | ousiness | |
| | | dar year bef December 3 | | ■ Wages, commissions, bonuses, tips | | \$12,049.00 | ☐ Wages, com bonuses, tips | missions, | |
| | | | | ☐ Operating a business | | | ☐ Operating a | ousiness | |
| 5. | Include include and other winnings. List each s | come regard public benefi If you are filir | ess of wheth t payments; ng a joint cas ne gross inco | e during this year or the tweer that income is taxable. Expensions; rental income; into e and you have income that me from each source separ | xamples c erest; divid t you rece | of other income are a dends; money collec- ived together, list it o | alimony; child suppoted from lawsuits; only once under De | royalties; an btor 1. | |
| | | | | Debtor 1 | | | Debtor 2 | | |
| | | | | Sources of income Describe below. | each (befo | s income from source re deductions and sions) | Sources of incomposition Describe below. | | Gross income (before deductions and exclusions) |
| | | / 1 of curren iled for ban | | Pension | | \$3,027.65 | | | |
| | r last calen nuary 1 to | dar year: December 3 | 31, 2015) | Pension | | \$7,266.00 | | | |
| | | dar year bef December 3 | | Pension | | \$7,859.00 | | | |
| Pai | - | Debtor 1's | or Debtor 2 btor 1 nor D | Made Before You Filed for s debts primarily consum- ebtor 2 has primarily cons personal, family, or househ | er debts? sumer de | bts. Consumer debt | 's are defined in 11 | U.S.C. § 10 | 1(8) as "incurred by an |
| | | During the | 90 days befo Go to line 7 | re you filed for bankruptcy, o | did you pa | ay any creditor a tota | al of \$6,425* or mor | e? | |
| | | □ Yes | List below e | each creditor to whom you pa editor. Do not include payme | ents for do | mestic support oblig | | | |
| | | * Subject t | | payments to an attorney for on 4/01/19 and every 3 year | | , , | or after the date of | f adjustment | |
| | Yes. | | | r both have primarily cons re you filed for bankruptcy, o | | | al of \$600 or more? | | |
| | | ■ No. | Go to line 7 | | | | | | |
| | | ☐ Yes | List below e | each creditor to whom you part ments for domestic support this bankruptcy case. | | | | | |
| | Creditor' | s Name and | Address | Dates of paym | ent | Total amount | Amount you | Was this p | payment for |

Page 34 of 51
Case number (if known) Document Debtor 1 Cassandra Grant

| 7. | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. | | | | | | | | |
|-----|---|---|------------------------|-----------------------|----------------------------|-------------------------------|--|--|--|
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment | | | |
| 8. | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos | | • | | ccount of a d | ebt that benefited an | | | |
| | Yes. List all payments to an insider Insider's Name and Address | Dates of payment | Total amount | Amount you | Reason for | this payment | | | |
| | | , , | paid | still owe | Include cred | | | | |
| 9. | Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title Case number Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo No. Go to line 11. Yes. Fill in the information below. | Nature of the case | s, divorces, collectio | on suits, paternity a | ctions, suppor | ne case d, seized, or levied? | | | |
| | Creditor Name and Address | Describe the Property Explain what happene | d | Date | Date Value of the property | | | | |
| 11. | Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. | | | | | | | | |
| | Creditor Name and Address | Describe the action the | e creditor took | Date taker | action was | Amount | | | |
| Pai | Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a No Yes List Certain Gifts and Contributions | another official? | | | | | | | |
| 13. | Within 2 years before you filed for bankrup No | otcy, did you give any gift | s with a total value | or more than \$60 | u per person | ſ | | | |
| | ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person | Describe the gifts | | Dates the g | s you gave ifts | Value | | | |
| | Person to Whom You Gave the Gift and Address: | | | | | | | | |

Case 16-18423 Doc 1 Filed 06/02/16 Entered 06/02/16 16:44:07 Document Page 35 of 51 Case number (if known) Debtor 1 Cassandra Grant 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Nο Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No п Yes. Fill in the details. Value of property Describe the property you lost and Describe any insurance coverage for the loss Date of your how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

5/31/16

Attorney Fees

No

Yes. Fill in the details.

Zalutsky & Pinski, Ltd.

admin@ZAPLawFirm.com

111 W. Washington

Suite 1550 Chicago, IL 60602

Person Who Was Paid
Address

Description and value of any property
Armount of or transfer was payment made

Description and value of any property
Armount of or transfer was payment made

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

Person Who Received Transfer

Address

Description and value of property transferred

payments received or debts paid in exchange

Person's relationship to you

Date transfer was made

paid in exchange

\$52.05

Case 16-18423 Doc 1 Filed 06/02/16 Entered 06/02/16 16:44:07 Desc Main Document Page 36 of 51

Case number (if known)

Debtor 1 Cassandra Grant

| 19. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. | | | | | | | | |
|-----|--|--|---|--|---|--|--|--|--|
| | Name of trust | Description and v | Description and value of the property transferred | | | | | | |
| Par | t 8: List of Certain Financial Accounts, In | struments, Safe Deposi | t Boxes, and Storage U | nits | | | | | |
| 20. | Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso No Yes. Fill in the details. | or other financial accou | nts; certificates of depo | | , , | | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of account or instrument | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer | | | | |
| 21. | Do you now have, or did you have within 1 cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution | year before you filed for | | deposit box or other depos | itory for securities, Do you still | | | | |
| | Address (Number, Street, City, State and ZIP Code) | Address (Number, S State and ZIP Code) | | oe the contents | have it? | | | | |
| 22. | Have you stored property in a storage unit No Yes. Fill in the details. | or place other than your | home within 1 year be | fore you filed for bankrupt | cy? | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or h to it? Address (Number, S State and ZIP Code) | | Do you still have it? | | | | | |
| Par | 19: Identify Property You Hold or Contro | I for Someone Else | | | | | | | |
| 23. | Do you hold or control any property that so for someone. No | omeone else owns? Incl | ude any property you b | orrowed from, are storing | for, or hold in trust | | | | |
| | Yes. Fill in the details. Owner's Name | Where is the prop | nerty? Describ | be the property | Value | | | | |
| | Address (Number, Street, City, State and ZIP Code) | (Number, Street, City, S Code) | | oe the property | Value | | | | |
| Par | t 10: Give Details About Environmental Inf | formation | | | | | | | |

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Case 16-18423 Doc 1 Filed 06/02/16 Entered 06/02/16 16:44:07 Desc Main Page 37 of 51 Case number (if known) Document

Debtor 1 Cassandra Grant

| 24. | Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No | | | | |
|-----|--|--|----------|--|--------------------|
| | Yes. Fill in the details. | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State a ZIP Code) | and | Environmental law, if you know it | Date of notice |
| 25. | Have you notified any governmental unit of an | ny release of hazardous material? | | | |
| | ■ No □ Yes. Fill in the details. | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State a ZIP Code) | and | Environmental law, if you know it | Date of notice |
| 26. | Have you been a party in any judicial or admin | nistrative proceeding under any en | vironr | mental law? Include settlements a | nd orders. |
| | ■ No □ Yes. Fill in the details. | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nat | ture of the case | Status of the case |
| Par | t 11: Give Details About Your Business or Co | nnections to Any Business | | | |
| 27. | Within 4 years before you filed for bankruptcy | , did you own a business or have a | any of | the following connections to any | business? |
| | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | |
| | ☐ A member of a limited liability compan | y (LLC) or limited liability partners | ship (L | LP) | |
| | ☐ A partner in a partnership | | | | |
| | ☐ An officer, director, or managing executive of a corporation | | | | |
| | ☐ An owner of at least 5% of the voting or equity securities of a corporation | | | | |
| | No. None of the above applies. Go to Part 12. | | | | |
| | Yes. Check all that apply above and fill in the details below for each business. | | | | |
| | Business Name D Address | Describe the nature of the business | S | Employer Identification number Do not include Social Security n | number or ITIN. |
| | (Number, Street, City, State and ZIP Code) | lame of accountant or bookkeeper | r | Dates business existed | |
| 28. | Within 2 years before you filed for bankruptcy institutions, creditors, or other parties. | , did you give a financial statemen | it to ar | | de all financial |
| | ■ No | | | | |
| | Yes. Fill in the details below. | | | | |
| | Name Address (Number, Street, City, State and ZIP Code) | Pate Issued | | | |

Case 16-18423 Doc 1 Filed 06/02/16 Entered 06/02/16 16:44:07 Desc Main Document

Page 38 of 51
Case number (if known) Debtor 1 Cassandra Grant

| Part 12: Sign Below | | |
|---|---|--------------------------|
| are true and correct. I understand that | nent of Financial Affairs and any attachments, and I declare under making a false statement, concealing property, or obtaining mone nes up to \$250,000, or imprisonment for up to 20 years, or both. | |
| /s/ Cassandra Grant | | |
| Cassandra Grant | Signature of Debtor 2 | |
| Signature of Debtor 1 | | |
| Date May 31, 2016 | Date | |
| Did you attach additional pages to You | r Statement of Financial Affairs for Individuals Filing for Bankrupt | tcy (Official Form 107)? |
| ■ No | | |
| ☐ Yes | | |
| Did you pay or agree to pay someone v | who is not an attorney to help you fill out bankruptcy forms? | |
| ■ No | | |
| ☐ Yes. Name of Person . Attach the | he Bankruptcy Petition Preparer's Notice, Declaration, and Signature (C | Official Form 119). |

connection

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/2015)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.

- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other

attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.

- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section

726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
 - ■The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
 - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
 - Any Funds received before filling shall be used for payment of court costs, filing fees, credit reports, credit counseling, postage, paper, copying and other related overhead costs.
 - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
 - (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
 - (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
 - (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$310.00
- 3. Before signing this agreement, the attorney has received, \$52.05

toward the flat fee, leaving a balance due of \$3,947.95; and \$0.00 for expenses,

leaving a balance due for the filing fee of \$0.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: May 31, 2016 | 3 |
|--------------------------------------|--|
| Signed: | |
| /s/ Cassandra Grant | /s/ Alexander Tynkov |
| Cassandra Grant | Alexander Tynkov 6273193 |
| | Attorney for the Debtor(s) |
| Debtor(s) | |
| Do not sign this agreement if the ar | nounts are blank. Local Bankruptcy Form 23c |

Case 16-18423 Doc 1 Filed 06/02/16 Entered 06/02/16 16:44:07 Desc Main Document Page 48 of 51

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In re | Cassandra Grant | | Case No. | |
|-------|--|--|----------------------------|-------------------------------------|
| | | Debtor(s) | Chapter | 13 |
| | DISCLOSURE OF COMPE | ENSATION OF ATTORNI | EY FOR DE | EBTOR(S) |
| | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fill be rendered on behalf of the debtor(s) in contemplation | ing of the petition in bankruptcy, or a | greed to be paid | to me, for services rendered or to |
| | For legal services, I have agreed to accept | | \$ | 4,000.00 |
| | Prior to the filing of this statement I have received | <u> </u> | \$ | 52.05 |
| | Balance Due | | \$ | 3,947.95 |
| 2. | \$ of the filing fee has been paid. | | | |
| 3. | The source of the compensation paid to me was: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 4. | The source of compensation to be paid to me is: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 5. | ■ I have not agreed to share the above-disclosed com | pensation with any other person unle | ss they are mem | bers and associates of my law firm. |
| | ☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the na | | | |
| 6. | In return for the above-disclosed fee, I have agreed to | render legal service for all aspects of | the bankruptcy c | ease, including: |
| | a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods. | | | |
| | Outside counsel may be employed und | ler firm supervision, and paid b | y our firm. | |
| 7. | By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any d | | | / proceeding. |
| | | CERTIFICATION | | |
| | I certify that the foregoing is a complete statement of a pankruptcy proceeding. | ny agreement or arrangement for pay | ment to me for re | epresentation of the debtor(s) in |
| | May 31, 2016 Date | Isl Alexander Tynkov Alexander Tynkov 62 Signature of Attorney Zalutsky & Pinski, Ltd 111 W. Washington Suite 1550 Chicago, IL 60602 312-782-9792 Fax: 3 admin@ZAPLawFirm Name of law firm | 73193 d. 12-782-0483 | |

United States Bankruptcy Court Northern District of Illinois

| In re | Cassandra Grant | | Case No. | | |
|-------|---|---|------------|----|--|
| | | Debtor(s) | Chapter 13 | | |
| | VE | RIFICATION OF CREDITOR M | ATRIX | | |
| | | Number of | Creditors: | 15 | |
| | The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge. | | | | |
| Date: | May 31, 2016 | /s/ Cassandra Grant Cassandra Grant Signature of Debtor | | | |

Afni 1310 Martin Luther King Dr Bloomington, IL 61701

Ascension Services L P 1550 N Norwood Ste 305 Hurst, TX 76054

AT&T Uverse IC System 444 Highway 96 East, P.O. Box 64378 Saint Paul, MN 55164-0378

AT&T Wireless P.O. Box 68055 Anaheim, CA 92817

Comcast 1255 W North Ave Chicago, IL 60622-1562

Convergent Outsoucing, Inc Po Box 9004 Renton, WA 98057

Cook County Treaserer P.O. Box 805438 Chicago, IL 60680-4155

Dr. Wojciech Ornowski 1600 Torrence Ave Calumet City, IL 60409

IC Systems, Inc 444 Highway 96 East Po Box 64378 St Paul, MN 55164

Internal Revenue Service Dept of the Treasury P.O. Box 21126 Philadelphia, PA 19114 Kahuna Payment Solutions 801 W Chestnut St Suite C Bloomington, IL 61701

MCSI -Municipal Collection Services, Inc 7330 College Dr Suite 108 Palo Heights, IL 60463

Penn Credit Attn:Bankruptcy Po Box 988 Harrisburg, PA 17108

Roadloans.com Attn: Bankruptcy 5201 Rufe Snow Dr Ste 400 North Richland Hills, TX 76180

Santander Consumer USA Po Box 961245 Fort Worth, TX 76161